



Pentagram

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Joint Base Myer-Henderson Hall firefighter Jeffrey Lee unrolls a fire hose during the JBM-HH exercise Aug. 4.

Photo by Sgt. Nicholas Holmes

Joint base responds to ‘real-world’ events

By Catrina Francis
Pentagram Editor

On Aug. 4, Joint Base Myer-Henderson Hall conducted a full-scale exercise that involved real-world events. The exercise provided the joint base, its tenants and on- and off-post partners an opportunity to react to various emergency incidents.

Dallas Lockley, a JBM-HH operation specialist, said the directorate of operations’ role was response because they had to maintain situational awareness of all on-base incidents.

“Not just on Joint Base Myer-Henderson Hall and Fort McNair, but also around (the joint base), explained Lockley. “(We have to) understand ... what our partners are doing. Not just talking about tenants and partners (who) work on the installation, but also our partners outside the installation like the Pentagon, Arlington County, (Washington,) D.C., ... they may play an integral role into our capabilities and how we respond to a situation. During the

exercise, the (base defense operations center) looks at maintaining the awareness not what is just going on, but what could happen.”

Lockley added that the BDOC had to encourage their team to remain task orientated, which was accomplished through teamwork. He said they had to, “communicate with each other, understand what each are doing and place tasks and responsibilities to each individual person inside the operations center as appropriate.

“It’s communication in whole when it comes to the joint base and its partners,” Lockley said. “The partners extend further out—the partners off the installation. These partners will provide additional resources and aid if the joint base needs it. (An incident) can affect our outside partners, not just us. Arlington County needs to be prepared to handle (a situation) as well. (The fire department) and (Directorate of Emergency Services) have a mutual understanding agreement with other emer-

gency services not just the state of Virginia, but throughout the country.”

The BDOC also had to juggle multiple tasks and sometimes at the same time. Lockley said having to do this helps because during a real-world incident, there is going to be the noise of the battlefield and the team has to deal and work through that noise.

The BDOC wasn’t the only post organization that had a vital role during the exercise. Kathy Feehan, the JBM-HH Army Community Service director, said in a real-world incident, ACS would stand up an Emergency Family Assistance Center. An EFAC is an expanded ACS center. It’s intended to provide guidance, assistance and referral services to Family members in the event of an emergency or major disaster, Feehan said.

“What we do as ACS during an emergency, we liaise with our community partners on post and off-post organizations like Child and Youth Services, casualty assistance center, the chapel,

(Military and Family Life Counseling Program counselors,) Red Cross, USO and others (who) provide a one-stop shop for service members and Families in need during a crisis situation.”

Feehan added that standing up an EFAC is about recovery. Standing up an EFAC doesn’t mean ACS stops assisting Soldiers and Family members. She said some of the services are stopped because the focus is on providing help with the remaining services.

She pointed out that the EFAC is also used to control rumors because they have to make sure everyone is receiving the correct information.

“The role of the EFAC is to provide Family members with accurate information that has been vetted to be released by (the public affairs office) so that they are not hearing wrong information that their neighbor may have heard or through other channels that could

See EXERCISE, Page 3

Services will make call on religious exemptions to COVID-19 vaccines

By C. Todd Lopez
DOD News

In a memorandum released Monday, the secretary of defense explained how he would ensure the continued health and safety of the U.S. military using the available COVID-19 vaccines.

“I will seek the President (Joe Biden) approval to make the vaccines mandatory no later than mid-September, or immediately upon the U.S. Food and Drug Administration licensure, whichever comes first,” said Secretary of Defense Lloyd J. Austin III.

Right now, there are three COVID-19 vaccines available. All are currently being used across the United States under “emergency use authorization,” from the Food and Drug Administration.

Those vaccines include the ones from Pfizer and Moderna, both of which require two injections. The Johnson & Johnson vaccine requires only a single shot.

If any of the three vaccines receive full licensure by the FDA before mid-September, Austin said, they would become mandatory immediately. If they do not receive the licensure by mid-September, however, the secretary will request a waiver from the president to make them mandatory.

For service members who have religious objections to receiving a vaccine, the path for how they might seek an exception to the vaccine is defined by their individual military service’s regulations, Pentagon Press Secretary John F. Kirby said during a meeting with the media Tuesday.

“There is a religious exemption possibility for any mandatory vaccine, and there’s a process that we go through to counsel the individual both from a medical and from a command perspective about using a religious exemption,” Kirby said.

Counseling, he said, includes a discussion with both a medical professional and a commander about the risks of not being vaccinated



Photo by Marine Corps 1st Lt. Kevin Stapleton
Navy Petty Officer 2nd Class Orbie VanCurine, assigned to the Combat Logistics Battalion 22, Camp Lejeune, North Carolina, prepares a COVID-19 vaccine during the opening of the state-run, federally supported Center City Community Vaccination Center at the Pennsylvania Convention Center in Philadelphia March 3.

as well as how not being vaccinated might affect deployability, assignments or travel. Requests for religious exemption differ by service, he said.

“We take freedom of religion and worship seriously, in the military, it’s one of the things that we sign up to defend,” he said. “And so it’s something that’s done very carefully.”

There are exemptions for mandatory vaccines for medical reasons as well, Kirby said, including preexisting medical conditions.

“The primary care physician will be able to help make that determination,” he said.

Nevertheless, the defense secretary and the department are confident that once the vaccines are mandatory, service members will

do their part.

“We have every expectation that once the vaccines are made mandatory, the troops are going to ... do the right thing,” he said. “Going forward with this particular vaccine, the secretary’s expectation is that commanders are going to treat the administration of that vaccine with — as he wrote in his memo — professionalism, skill and compassion.”

Kirby also said the department would ensure that every individual with reservations about getting a vaccine gets proper counseling on its safety and efficacy as well as how not getting the vaccine could affect teammates, readiness and the mission.







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DEVCOM Army Research Laboratory's Video Game Design Camp

Military Dependents in grades 5 – 7 at Ft. Meade, Aberdeen Proving Ground, and in surrounding communities are invited to step into the role of computer scientists and video game programmers in a 2-part STEM camp designed just for them!

Session 1 (September 11, 2021, 0900-1230):
Engage with Army Research Laboratory Soldiers & Scientists as you design and program your own video game.

Session 2 (September 18, 2021, 0900-1230):
Engineer a video game controller and use it to play the game you designed. Learn about STEM educational opportunities and careers from Army Research Laboratory STEM Researchers.

This virtual workshop is FREE!

Registration will be open from June 1 until August 30, or until seats are filled. Space is limited, so register today!

Registration Link: <https://cvent.me/qMA4eo>

Pentagram



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Community

EXERCISE from Page 1

be incorrect,” she said. “During a real-world incident, we would be in close coordination with PAO to make sure information we are providing Family members is accurate and releasable.”

Feehan pointed out that the EFAC also has the ability to provide services in a virtual environment.

“As we learned throughout COVID, there is also the ability to provide a lot of these services virtually,” she said. “What if the installation is shut down? We still need to provide those services. We have proven we have the ability to do that through (Microsoft) Teams and other platforms.”

She added that there are different phases of the EFAC. The first phase could be a call center and depending on the incident, there might be a need to have a 24-hour EFAC, which would be the next phase.

“If we need to elevate to that next level, we would have a physical or virtual EFAC, and then the commander could decide to stand up to 24 hours per day,” she said.

Although the incidents weren’t real-world events, Feehan said having the exercise provided ACS an opportunity to work on critical functions.

“(Having an EFAC is) one of those functions you hope you don’t have to provide, but the time is probably going to come when we have to stand up an EFAC in a real-world situation,” Feehan said, “and we definitely want to be ready.”

Lockley said the exercise was helpful because the BDOC can always do things better because there is always room for improvement.

“Not just learn, but continue to work toward ... lessons (and) work toward implementing those lessons learned,” said Lockley. “It’s those actions, those follow-on actions we have to continue to put effort into improving.”

Pentagram editor Catrina Francis can be reached at catrina.s.francis2.civ@mail.mil.



Photos by Sgt. Nicholas Holmes

(Above) Malanya Westmoreland, the JBM-HH emergency management specialist, works on a scenario in the BDOC during the base full-scale exercise Aug. 4.

(Left) Marine Corps volunteer role players added realism to the protestors scenario.



(Left) Lt. Col. Heather McGrath, the JBM-HH provost, (middle) police Maj. Jennifer Ruggles, the JBM-HH deputy chief of police, and JBM-HH fire inspector James Dansereau, talk about the scenarios during the joint base full-scale exercise Aug. 4. The trio were working in the BDOC to make sure there was proper communication while the base was under “attack.” Above, a Marine volunteer role player tries to breach the gate.

WATCH THE HEAT INDEX

HYDRATE!

Heat exhaustion occurs when people are exposed to very high temperatures and don't drink enough fluids. Symptoms include heavy sweating, clammy skin, weakness, nausea, vomiting and fainting. Go indoors and hydrate!

		Relative Humidity (%)															
		40	45	50	55	60	65	70	75	80	85	90	95	100	Heat Index (Apparent Temperature)		
Air Temperature	110	136															
	108	130	137														
	106	124	130	137													
	104	119	124	131	137												
	102	114	119	124	130	137											
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86	85	87	88	89	91	93	95	97	100	102	105	108	112				
84	83	84	85	86	88	89	90	92	94	96	98	100	103				
82	81	82	83	84	84	85	86	88	89	90	91	93	95				
80	80	80	81	81	82	82	83	84	84	85	86	86	87				

With Prolonged Exposure and/or Physical Activity

Extreme Danger

Heat stroke or sunstroke highly likely

Danger

Sunstroke, muscle cramps, and/or heat exhaustion likely

Extreme Caution

Sunstroke, muscle cramps, and/or heat exhaustion possible

Caution

Fatigue possible

TAKE CARE WORKING OUTDOORS!

Heat stroke is **deadly**. It develops when the body temperature rises to 106 degrees. People suffering heat stroke stop sweating and become confused. Call 911 immediately.



Photos by Spc. Brandon Muniz

The United States Army Voices sing during an 1812 Overture Concert at the National Museum of the United States Army on Fort Belvoir, Virginia, Sunday. This performance has occurred annually for more than 40 years.

After yearlong hiatus, 1812 Overture



(Left) The U.S. Army Band plays during the 1812 Overture Concert Sunday at Fort Belvoir, Virginia.

(Far left) The audience watches the screen while listening to the band play during the 1812 Overture Concert Sunday.

(Below) A Joint Base Myer-Henderson Hall 3d Infantry Regiment (The Old Guard) Soldier smiles during the concert.





Infant massage

Infant massage will be held Aug. 12, 19 and 26 from 2 to 4 p.m. in the Henderson Hall Chapel. Of the five senses, touch is the one that's most developed at birth. Research suggests that infant massage has enormous benefits for helping a baby's growth and thrive. It can ease tummy troubles and helping with soothing to sleep. Infant massage will be taught over a span of four weeks with instructors demonstrating on dolls. Preregistration is required. For more information or to register, call (703) 693-1160 or (703) 614-7204.

JBM-HH playgroup

The JBM-HH playgroup is Sept. 9, 16, 23 and 30 from 10 to 11:30 a.m. in the Henderson Hall Chapel. During the playgroup, children will have sing along songs and story time. The playgroup is for infants to five year olds. For more information or to register, call (703) 693-1160 or (703) 614-7204.

Breastfeeding basics

Breastfeeding basics will be held Friday from 8:30 a.m. to 12:30 p.m. at 2034 Barnett Ave. Quantico, VA 22134, Little Hall, lower level, NPSP activity room. New parents will learn how breastfeeding works, when and how

much to feed and so much more. This class is recommended for the third trimester of pregnancy. For more information or to register, call (703) 784-4248 or email mccquanticonpsp@usmc.mil.

Baby boot camp

Baby boot camp will be held Aug. 20 from 8:30 a.m. to 2:30 p.m. Baby boot camp is an all-day class designed to help alleviate some of the stress of bringing a newborn home by teaching parents information that they will need for the first few weeks at home. The class covers such topics as diapering, bottle and breastfeeding, how to soothe a fussy infant, safe sleep, when to call the doctor and much more. Individuals don't have to be a first time parent to attend and it is recommended that they participate when they are in their third trimester of pregnancy. Preregistration is required. For more information or to register, call (703) 693-1160 or (703) 614-7204.

1-2-3 magic parenting

The 1-2-3 Magic Parenting Program is the No. 1 selling child discipline program in the United States. The program's parenting tips and resources help parents raise well-behaved, happy, competent kids. Registration is re-

quired. For more information or to register, email donna.m.frye2.ctr@mail.mil.

Anger management

Anger management is being held Aug. 17, 24, 31 and Sept. 7, 14, 21 and 28 from 1 to 3 p.m. in Henderson Hall's Bldg. 12. This is an in-person course. This is a set of eight classes that review eight tools of anger management. The goal of this set of classes is to teach individuals how to accurately examine triggers and perceptions of situations and learn healthy and constructive ways in which to express frustrations. Individuals should register for the day and time that works best for their schedule. These courses should be taken over the span of eight weeks, one session per week. For more information or to register, call Candi Heinberger at (703) 693-9146 or by email at candi.heinberger@usmc-mccs.

Seven principles of marriage

Based on Dr. John Gottman's book "The Seven Principles for Making Marriage Work," this class teaches the warning signs of a troubled marriage and the steps couples can take to repair their relationship. Registration is required. For more information or to register, email Donna Frye at donna.m.frye2.ctr@mail.mil.

Ribbon cut for renovated TOG barracks



Joint Base Myer-Henderson Hall Command Sgt. Maj. Matthew Majeski and the 3d U.S. Infantry Regiment (The Old Guard) Command Sgt. Maj. Phillip Whittington cut the ribbon at the newly renovated TOG barracks Bldg. 246 on the joint base July 15.

Photo by Sgt. Austin Boucher



You're hired

By Retired Chaplain (Brig. Gen.) Ray Bailey
Former Deputy Chief of Chaplains

Trying to sell ourselves to others in order to be accepted, liked, respected or be included is a daily process. It happens with all relationships to one degree or another. We go a bit further with giving attention, we slip in the conversation our achievements, we smile a bit more, laugh a little louder at a joke, appreciate new clothes or jewelery, keep the resume strong with our attributes and make the handshake strong and confident. We want to fit in and others see our best side.

I'm reminded of this when I heard about a young man who applied for a job as an insurance salesman. Where the form requested "prior experience," he wrote, "lifeguard." That was it. Nothing else. "We're looking for someone who can not only sell insurance, but who can sell himself as well," said the hiring manager. "How does working as a lifeguard pertain to salesmanship?" The young man replied, "I couldn't swim." He got the job. We can try hard and earnestly to be accepted, fit in or like the young man, get a job. We

can become desperate with this need, even to the point of allowing our beliefs, values and morals slip. Lying and exaggerating slips into our behaviour. Ignoring wrong becomes easier. It can even become so confusing that we lose ourselves within the person we've created and we want to become. Who we are in truth is the most powerful aspect of ourselves we need to keep intact and share. We are authentic and truthful about what we believe. The response will most often be of respect and trust. They get what they see and hear and we feel good about ourselves. You've got the job. Our Creator didn't make a mistake.

JBM-HH Religious Services are on a weekly basis at Memorial Chapel.
To view service updates, please visit the Religious Support Office Facebook page at <https://www.facebook.com/jbmhhroso> or email the Religious Support Office at usarmy.jbmhh.usag.mbx.memorial-chapel@mail.mil. Services are subject to cancellation in the event of inclement weather.

Catholic Mass	Saturday at 5 p.m. and Sunday at 8:30 a.m.
Protestant Service	Sunday at 10:30 a.m.
Gospel Service	Sunday at 12:30 p.m.
Samoan Service	Held the first Sunday of every month at 2:30 p.m.

The RSO now streams the following Sunday services via the JBMHH Religious Support Facebook page:

Catholic Mass	8:30 a.m.
General Protestant	10:30 a.m.
Gospel Service	12:30 p.m.

The Fort Belvoir Jewish Congregation host Saturday services and religion education opportunities for Families. For information about Saturday services and programs at Fort Belvoir, contact the Jewish coordinator, Sara Astrow by email at saralyn.astrow.ctr@mail.mil or phone at (703) 806-3393.



Debunking anti-vaccine myths with scientific facts

By Janet Aker
MHS Communications

Even after months of vaccinations and nearly 1 million service members have received a vaccine, myths and misinformation surrounding the COVID-19 vaccines still abound.

However, the science behind the vaccines and the effectiveness of those vaccines remain.

Some of the reasons why military personnel say they are not being vaccinated include:

- Skepticism about the effects of the COVID-19 disease on young, healthy service members
- Questions about the vaccine’s possible long-term side effects that could emerge years later
- Changing information about the COVID-19 vaccines and the virus itself
- Concerns about a baby’s health in a pregnant service member
- Fears among male service members about their future fertility

Many of these concerns stem from false, inaccurate or misleading information gathered from social media and misinformation super-spreaders.

Fact: The belief that young people cannot become seriously ill from catching the coronavirus is false. And newer, anecdotal reports suggest the virus’s Delta variant is causing more serious illness in young people compared to versions of the virus that were spreading last year.

The Truth About Side Effects

Fact: Even the young and healthy can still become infected and be a vector for spreading the virus, so everyone should be vaccinated to protect others, if not just themselves.

Fact: While there have been some rare but serious side effects detected after vaccinations, including an inflammation of the heart muscle and a neurological condition called Guillen-Barre syndrome, most of these cases recover. The Food and Drug Administration has months of data on the vaccines. That is from the more than 165 million people who are fully vaccinated in the U.S.

Fact: The messenger RNA vaccines from Pfizer-BioNTech and Moderna are based on a safe vaccine platform, which data go back to the 1990s, and the Johnson & Johnson Janssen vaccine is based on tried-and-true technology.

Fact: FDA is moving forward on full approval for COVID-19 vaccines, which may allay fears about long-term side effects. Pfizer submitted the vaccine for full approval July 16 for those ages 16 and older, according to the FDA. Moderna said it could apply for full approval before year-end.

On July 22, the Centers for Dis-



Photo by Spc. Clara Soria-Hernandez
A Norwegian soldier administers a COVID-19 vaccine to U.S. Soldier at Ayn Al Asad Air Base, Iraq, June 4. Norwegian soldiers volunteered to administer COVID-19 vaccinations to U.S. Soldiers, coalition forces, and civilian contractors.

ease Control and Prevention Advisory Committee on Immunization Practices recommended that the Johnson & Johnson Janssen vaccine’s safety and effectiveness benefits still outweigh its rare risks for Guillen-Barre syndrome, and other side effects.

All three vaccines have rare adverse events including myocarditis/pericarditis, an inflammation of the heart. However, the ACIP decided that currently, the benefits still significantly outweigh the risks for COVID-19.

Fertility Questions

“The questions have changed over time, but the infertility issues remain” on the minds of pregnant service members at Fort Bragg, North Carolina, said Dr. Y. Sammy Choi, chief of the Department of Research at Womack Army Medical Center.

The science, however, backs the fact that there are no signs of harm to the fetus.

Fact: Of the more than 69,000 pregnant women vaccinated against COVID-19, there are no signs of harm to the fetus. In fact, babies born to vaccinated women are born with immune responses against the virus.

An April 22 study in the “New England Journal of Medicine” tracked 35,691 pregnant women. Compared to a control group of pregnant women pre-COVID, “women who had received the vaccine did not experience an increased rate of miscarriages or adverse neonatal outcomes,” the article stated.

Fact: The vaccines have no known impact on fertility in men. The dangers of losing fertility are greater from actually getting COVID-19, especially among men who have circulatory issues that could result in erectile dysfunction.

A study in the journal “Andrology” found that “there is

preliminary evidence in a real-life population of ED dysfunction as a risk factor of developing COVID-19 and possibly occurring as a consequence of COVID-19.” The study was observational and does not prove causality, but it will lead to more research to delineate the effects of SARS-CoV-2, the virus that causes COVID-19, and male reproductive health, Choi said.

A research letter published in the “Journal of the American Medical Association” June 21 found that “sperm counts were not lowered in men receiving either of the mRNA vaccines.”

Fact: U.S. Surgeon General Dr. Vivek Murthy said in his July 15 report on handling health misinformation. “During the COVID-19 pandemic, health misinformation has sowed confusion, reduced trust in public health measures, and hindered efforts to get Americans vaccinated.”

There are other reasons service members are citing for not being vaccinated, Choi said. From his discussions with soldiers at Fort Bragg, these include:

- Service members have a choice to refuse because the vaccine is not mandated as it is still under emergency use authorization. That could change if, and when, the vaccines are fully approved.
- Some people believe that the vaccine does not really work otherwise the president would have mandated it. It remains unclear what the president is thinking about full vaccination mandates just yet.
- Some believe that COVID-19 will have little effect on service members personally. This is generally true as the chance of severe disease is small, Choi said.
- Many unvaccinated service members believe that if they got sick, there would be little

societal effect. This is false because an infection can lead to mutations, as shown by the Delta variant, Choi said.

- The vaccinated are having breakthrough cases. This is true but only in very small numbers.
- The vaccine is not working since officials are discussing boosters. This is false. Boosters are to enhance efficacy, Choi explained, adding, “If the vaccine was not really working, we would not give boosters, but a completely different vaccine.”
- Some experts, including PhD scientists and medical doctors, have told the public not to get the vaccine. Unfortunately, this is true, he noted
- If things are as bad as the CDC said, why have some states reduced mask mandates instead of increasing them (a recent argument)? Unfortunately, this is also true and depends on the viewpoints of individual state leaders rather than medical experts
- Seemingly, smart elected officials, including some doctors, are providing mixed messages. This is true and happens all too often, Choi pointed out.

To counter such false reasoning, federal and state governments and the military continue to tailor their pro-vaccination messages very carefully. Already, in recent weeks there has been an uptick in Americans being vaccinated as the number of those infected with the Delta variant increases exponentially.

“One of the appeals I am using now is that of perfection,” Choi said. “Some are demanding the trifecta for the vaccine — 100% without serious side effects, 100% without breakthrough cases and 100% without the need for a booster.

“If we required that same perfection in all that we did ... none of us would ever take a pill or any of the vaccines that most of us have taken or given to our children.”



Sailors assigned to the Los Angeles-class fast-attack submarine USS Olympia (SSN 717) participate in a swim call in the Pacific Ocean, July 31, 2018. *Photo by Navy Fire Control Technician Senior Chief Vien Nguyen*

Summer water safety means: Know your limitations

By Janet Aker
MHS Communications

Swimming in a pool, a lake, a pond or an ocean is the height of cool summer fun but swimming also has its dangers.

Open waters with strong tides are risky for even the most experienced swimmers. The most placid pools can be very dangerous for young children. Alcohol always raises the threat level for swimmers.

In addition, complacency of any kind creates potential problems around the water.

“The most important thing to remember is how unpredictable it can be,” said Marine Staff Sgt. Houston Lindemann, senior non-commissioned officer in charge of beach lifeguards at Camp Lejeune, North Carolina. “Always check the currents and weather conditions at the location you plan to swim.

“Once you find that conditions are safe, check for the closest lifeguards to where you will be swimming. Swimming at beaches, lakes, or pools with lifeguards on duty is the best way to stay safe.”

Jim VanHoesen, a lifeguard at Holloman Air Force Base, New Mexico, said, “You need to know the body of water and

the shoreline.”

VanHoesen suggested that another core precaution is “to get a formal training course in swimming for the entire Family.” The Red Cross provides many courses on swimming for beginners as do many base pools.

In the pool at Holloman, parents are told to watch out for their children at all times and not to count on the lifeguard as a babysitter.

“We have an arm’s length rule,” VanHoesen explained

Adults always need to be within an arm’s length of a child in case of trouble.

That rule exists because toddlers and children are silent drowners. They do not splash about or cry for help but go silently straight to the bottom. It all can happen in a matter of seconds.

What should a person know before he or she jumps into that inviting pool?

“Always know the depth of the pool,” VanHoesen said, “and don’t jump headfirst the first time. Know where the ladders and lifeguard stations are located.”

Before a person leaves the house, VanHoesen said, bring provisions to “stay hydrated, bring sunscreen and layers of clothes should the weather change.”

When swimming at beaches that do not have lifeguards, “it is extremely important to know your limitations,” Lindemann said. “Do not do more than you are capable of. It is also important to know how to spot rips and tide changes when swimming at unguarded beaches.”

Rip currents, “are strong, localized, and narrow currents of water that move directly away from shore, cutting through the lines of breaking waves like a river running out to sea,” Lindemann explained.

If caught in a rip current, he offered this advice, “The best practice is to relax and swim parallel to the shore until free from it. Do not tire yourself out by trying to swim directly back to the shore.”

Here are some other tips to keep a service member and his or her Family safe while in or near the water:

- Watch out for the “dangerous toos” — too tired, too cold, too far from safety, too much sun and too much strenuous activity.
- Have a means of summoning help (such as a mobile phone) close by. Water emergencies often happen quickly and unexpectedly.

- Get trained in first aid, cardiopulmonary resuscitation and automated external defibrillator use.
- Always swim with a partner, especially in open water.
- A person should never swim when he or she is tired, under the influence of alcohol, drugs or medication.
- Observe all posted warning signs.
- Do not run around the pool deck; it is wet and likely slippery.
- Do not let children roughhouse or play underwater breath-holding games.
- Watch the weather and stay out of the water during thunderstorms.
- Always make young children, inexperienced swimmers and nonswimmers wear U.S. Coast Guard-approved life jackets whenever they are in, on or around the water.
- Fence pools and spas with adequate barriers to prevent unsupervised access.
- Teach children to stay away from pool drains and other openings that create suction, which could lead to drowning.
- Know what kinds of animals are in the water and which to avoid.



STAY VIGILANT

Report concerns to Base Defense Operations

Usarmy.jbmhh.id-sustainment.mbx.dptms-bdoc@mail.mil

(703)696-5113/5662 Together, keeping JBM-HH safe.

Dial 911 in emergencies. For non-emergency dispatch, call (703)588-2800/2801.



Checking iron levels in blood can save lives

By Claudia Sanchez-Bustamante
MHS Communications

It's a condition that can cause fatigue, joint pain, sexual dysfunction and, if left untreated, cancer and organ failure.

It's also most likely to afflict white men over the age of 40, but it's a potential risk for anyone.

The condition, known as Hemochromatosis, results from having excess iron in a person's blood. It's treatable, but it poses very serious health risks and needs to be diagnosed early and managed aggressively.

Having some iron in a person's blood is essential for several key body functions, like oxygenating the blood, converting blood sugar to energy and boosting the immune system, among others.

However, too much iron can become toxic and cause organ failure.

There are two main causes of Hemochromatosis. It can be inherited via genetic mutations or people can acquire it over time from drinking too much alcohol, consuming too much iron through their diet or as a symptom of other blood-related disorders.

Moreover, while it can affect men and women equally, men experience symptoms and complications of hemochromatosis more commonly.

"Typically, symptoms in men develop at a younger age compared to women, around 40," said Maj. (Dr.) Christian Horn, a gastroenterology and hepatology specialist at the San Antonio Military Medical Center's Department of Gastroenterology in Texas. "Women are typically protected from early manifestations and complications of hemochromatosis due to iron loss with menses but may start to develop symptoms and complications after menopause."

While there are numerous genetic mutations that can cause a dangerous excess of iron in the blood, the most common gene mutation occurs in the HFE gene, Horn said.

That genetic mutation alters the body's ability to regulate iron absorption. As a result of the overload, the iron begins to deposit in various organs throughout the body, including the liver, pancreas, heart, joints, gonads, brain and skin, causing dysfunction or abnormalities of those organs, he said.

Symptoms

Classically, hemochromatosis affects populations of European ancestry at a higher rate than other ethnicities, explained Horn. Still, it has been observed in all ethnicities.

The symptoms of hemochromatosis depend on the amount of iron accumulated in the body. The more iron that accumulates, the more severe the symptoms are likely to be.

As a result, it's possible that younger patients remain asymptomatic because a significant amount of iron has not yet accumulated.

"There is a wide spectrum of possible symptoms from hemochromatosis, including end-stage liver disease (cirrhosis) and liver cancer if not detected before significant liver damage occurs," he said.

The initial symptoms are nonspecific and include fatigue, lethargy and apathy, he furthered. However, as the disease progresses, patients may notice pain in their joints (arthropathy), classically in the knuckles of the index finger and middle finger. It can also cause a person's skin to turn "bronze," or result



Photo by Defense Media Activity — Marines

Blood donation is a good way for hemochromatosis patients to get excess iron removed from their blood while also helping someone else in need of blood. In the photo, a Marine donates blood at an Armed Services Blood Program Donation Center at the Pentagon.

in sexual dysfunction (impotence, decreased libido, infertility or loss of menses).

"Other symptoms include early onset Type 2 diabetes or cardiac irregularities, including arrhythmias and heart failure," said the gastroenterologist.

If detected after significant liver damage has occurred, "patients can develop cirrhosis and complications related to this condition, including fluid in the abdomen, confusion or altered mentation or throwing up blood from the rupture of large veins in the esophagus," the gastroenterologist said.

Horn explained iron could also increase the aggressiveness of certain bacterial species, resulting in patients becoming more susceptible to certain bacterial infections.

"Bacteria which are more common with hemochromatosis include *Yersinia enterocolitis*, resulting in right lower quadrant abdominal pain, fever, vomiting, and diarrhea or *Vibrio vulnificus* (transmitted by eating undercooked seafood), resulting in a severe systemic bacterial infection or severe skin infections," he said.

Treatment

The Centers for Disease Control and Prevention said the earlier hemochromatosis is diagnosed, the less likely patients are to develop serious complications, which could cause permanent problems.

Horn emphasized that screening is important because of the number of possible complications that can occur due to continued, unregulated iron overloads. All it takes is a blood test to determine iron levels.

"If (the test results are) abnormal, a genetic screen can be performed to evaluate for abnormal genes that are associated with the condition," he said.

If the screenings reveal elevated iron levels, patients can start treatment to prevent the major complications of the disease. Occasionally, a liver biopsy may be required to confirm the diagnosis of hemochromatosis and determine the extent of the disease.

Hemochromatosis is curable with a liver transplant, but due to the limited availability of livers for transplantation, this procedure is reserved for patients, who have end-stage liver disease or liver cancer, said Horn.

"The majority of hemochromatosis patients

will need to be treated throughout their life to maintain normal iron levels and prevent complications," he said.

According to the National Institutes of Health, patients diagnosed with hemochromatosis can treat it with regularly scheduled blood removal — known as phlebotomy — as well as changes in diet, and medication to lower the amount of iron in their body.

However, "the first line of treatment for hemochromatosis is phlebotomy," said Horn.

Since almost two-thirds of the body's iron is found in the hemoglobin within red blood cells, removing blood decreases the amount of iron in the body. However, patients who are not tolerant to phlebotomy can opt for medications that have the same effect.

"They bind to excess iron in the body and excrete it in the urine or feces," he said.

Additionally, donating blood is a good way to remove excess iron from the body while also providing blood to another individual who could use the blood, said Horn. The Armed Services Blood Program is mission critical and has joint blood program officers within each combatant command to support the global blood mission.

Effect on readiness

Horn stated that most active-duty service members with hemochromatosis would not have any symptoms when they're young, but older active-duty troops may start to experience symptoms from uncontrolled hemochromatosis.

"When hemochromatosis is identified in a young Soldier, it's important they start treatment as soon as there is evidence of iron overload," said Horn. "This will require multiple sessions of phlebotomy, which may prevent them from deployment, until their iron levels are better controlled."

Since Soldiers will continue to require periodic lab tests and phlebotomy sessions every few weeks to months, they will need to be stationed at a base with those capabilities, he said.

"As long as their iron levels are controlled, and they have no evidence of advanced disease related to hemochromatosis, they can be deployed to locations that have laboratory and phlebotomy capabilities," said Horn.

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News Notes

JBM-HH virtual town hall

The next JBM-HH Virtual COVID-19 Town Hall is at 1 p.m. Aug. 12 with host Joint Base Chief of Staff, Patrick MacKenzie.

Individuals can view the event live and ask questions on the JBM-HH Facebook page at <https://www.facebook.com/jbmhh/>. Questions may also be emailed to army.jbmhh.asa.list.pao-all@mail.mil.

Gate closures

At Fort McNair, 2nd and 4th Avenues will be completely shut down Thursday between 11 a.m. and 3 p.m. Please use alternate measures to access the installation during that time.

On Saturday, the Henderson Hall gate will be closed from 7 a.m. to 1 p.m. for routine repair and maintenance. During this time, visitors to JBM-HH are directed to use Hatfield and Wright gate for entering and exiting the installation.

ACS relocates

Joint Base Myer-Henderson Hall Army Community Service has relocated to Bldg. 203 and provides virtual and in-person services. For more information about ACS and its services, please call (703) 696-3510.

JBM-HH face mask policy

According to the Centers for Disease Control and Prevention, Washington, D.C., and Arlington County are now “substantial” transmission areas for COVID-19 and the Delta variant. Face coverings are now required in all indoor settings on Myer, McNair and Henderson Hall — regardless of vaccination status. The mask mandate remains in place for all non-vaccinated individuals — indoors and outdoors.

Performance Triad Month

August is Performance Triad Month. Performance Triad, also known as P3, is the synergy of sleep, activity and nutrition as foundational tenants of optimized health. P3 is the Army’s commitment to strengthen individual readiness, build resilience and optimize performance of the total Army Family.

JBM-HH gyms, pools are open

All JBM-HH gyms are open to DOD ID cardholders. The Myer Fitness Center hours are weekdays from 5 to 7:30 a.m., 11 a.m. to 1 p.m., and 4 to 6 p.m. and the McNair Fitness Center is open 24/7 daily for those with registered access. Registration for McNair Fitness Center will be by appointment only. At this time, people will need to call and make an appointment to register for the 24/7 access by calling Lydia Mease at (571) 315-9125 Monday to Friday from 9 a.m. to 5 p.m. The DFMWR pool is open daily from

11 a.m. to 8 p.m. until Labor Day, Sept. 6. Seasonal pool memberships and daily pool passes are on sale from 10 a.m. to 4 p.m. Monday through Friday at the Patton Hall Community Club and Conference Center Catering Office, Bldg. 214. The Smith Gym at Henderson Hall has new hours. The Smith Gym operational hours are Monday to Friday from 5 a.m. to 7:30 p.m. and weekends 8 a.m. to 2 p.m. The Zembiec pool facility is open Monday through Friday from 6 a.m. to 7 p.m. and is closed weekends and holidays. Adult lap and open swim is available all day. Youth lap and open swim hours are 8 a.m. to 5 p.m. The facility is open to active duty and Reserve uniformed service members, retirees, dependents and current DOD/USCG civilians with an ID card.

JBM-HH remains at HPCON Bravo

Because there has been an uptick in positive COVID-19 cases, the National Capital Region remains at Heath Protection Condition Bravo. Please continue to follow the joint base commander’s policy regarding the use of face coverings and maintaining social distancing.

August is Antiterrorism Awareness Month

In February 2010, the Department of the Army designated August as Antiterrorism Awareness Month — a month DOD leaders have deemed an appropriate reminder of the Sept. 11, 2001 terrorist attacks, and the lead into National Preparedness Month held annually in September.

This year, in light of the current pandemic, the Antiterrorism Awareness Month is more important than ever. This is not the time to become complacent. August will mark the 12th observance of the month. The intent is to instill DOD-wide heightened awareness and vigilance to combat terrorism, extremism, insider threats and protect DOD critical resources from acts of terrorism. Commanders/leaders at all levels are given wide latitude to execute ATAM actions to meet local and mission requirements.

Antiterrorism awareness will provide Armywide heightened awareness and vigilance to protect Army critical assets and personnel by preventing acts of terrorism. During the month of August, Joint Base Myer-Henderson Hall and units will focus their efforts to heighten awareness and vigilance to prevent and protect the joint base communities from acts of terrorism.

- The focus areas that are planned for fiscal year 2022 are: Cyber threat awareness and prevention
- Vetting visitors to Army Activities
- Protection of standalone Facilities
- Antiterrorism strategy

- Countering insider threats and workplace violence
- Reporting and countering the use of unmanned aerial vehicles
- Becoming familiar with the risks associated with the use of social media

Death notice

Anyone with debts owed to or by the estate of Maj. Delbert S. L. Joo, HQDA, DCS, G-3/5/7, must contact Lt. Col. Christopher Harvey Sr., the summary court-martial officer for the officer. Joo passed away July 12. Harvey can be reached by calling (703) 692-8220 or by email at christopher.harvey3.mil@mail.mil.

Army Emergency Relief is here for Soldiers, Families

Army Emergency Relief is an invaluable resource for Soldiers and Families. Financial help is given in the form of an interest free loan, grant, or combination of the two. If a Family has a financial need, the Soldier should call Trina Reliford at (703) 696-8435. AER is open Monday through Friday from 7:30 a.m. to 4 p.m. Please note that documentation is required to justify the dollar amount for loans.

Ride the Myer Flyer

The Myer shuttle service, between Myer, Henderson Hall and the Pentagon, has resumed. Please keep in mind that riders will be required to show their CAC or military ID to the shuttle driver.

Face coverings will be required for all riders; and only a maximum of 50% of passengers will be allowed on the bus at this time. Food or drink are not authorized while on the bus.

Live concerts are back

The U.S. Army Band “Pershing’s Own” live concerts are back. The band has released a comprehensive summer lineup through September. Check out the full calendar at <https://www.usarmyband.com/calendar>. As always, the band’s concerts are free and open to the public.

Marine Corps Marathon

The Marine Corps Marathon Organization is excited to announce that the 2021 Marine Corps Marathon Weekend will be held live and in-person this Oct. 29-31 in Arlington, Virginia, and the nation’s capital. The 2021 MCM Weekend includes the live 46th MCM, MCM50K and MCM10K Oct. 31, with all three events being offered as virtual options as well between Oct. 1 and Nov. 11. Full details can be found at <https://www.marinemarathon.com/>.

Army Ten-Miler

Virtual registration for the live Army Ten-Miler have begun. For full details, or to register for the

event, which takes place Oct. 10, visit <https://www.armytenmiler.com/>.

Dive-In Movie

DFMWR will present “Dive-In Movie” nights this summer. Disney’s “Descendants,” rated G will be showing Aug. 14. Gates for both show will open at 8:15 p.m. with showtime at 9 p.m. Admission to both showings is free for all DFMWR seasonal pool members and \$3 per entry for nonpool members. Audience members must provide their own floatation devices. In the event of severe weather, the showing will be cancelled.

Marine Corps Exchange

The Marine Corps Exchange is open from 9 a.m. to 7 p.m. Monday through Saturday and from 10 a.m. to 6 p.m. Sundays and holidays, to include the Vineyard. All three levels are open.

The Marine Corps ID Card Center continues to serve, by appointment only, at Marine Corps Exchange on the third floor. The hours of operation are from 9 a.m. to 5 p.m. Monday through Friday, with a daily closure from 11 to 11:30 a.m. All personnel are required to book appointments at <https://idco.dmdc.osd.mil/idco/locator>.

The carwash service at Henderson Hall remains open. For more information on Henderson Hall services and hours of operation, visit <http://www.mccshh.com/mcx/>.

Commissary early bird hours, Click2Go

The Commissary has begun early bird services every day. The Commissary hours are now Monday to Friday from 7 a.m. to 7:30 p.m., Saturday 7 a.m. to 6:30 p.m. and Sunday 7 a.m. to 6 p.m. This week the commissary said hello to Commissary CLICK2GO, an online shopping and curbside pickup service individuals can access from their mobile devices. For full details, visit <https://www.commissaries.com/shopping/click-2-go>. For additional information on the Fort Myer Commissary, visit the Commissary official website at <https://www.commissaries.com/shopping/store-locations/>.

Virtual SHARP training

There is nothing more important than the welfare and readiness of our people, the people of the National Capital Region and its population of military and civilian forces.

Fiscal year 2021 sexual harassment, assault response and prevention refresher training is open to all assigned to the National Capital Region. This training reasserts the importance for leaders and the chain of command in providing quality, relevant training and education to improve and sustain positive organizational climates that emphasize Army values and treat everyone with dignity and respect.